| TR   | j.  | Filing Date First Named Inventor Art Unit Examiner Name  Attorney Docket Number   | See Attac See Attac See Attac See Attac See Attac | Approved for use through 07/31/2006. OMB 0651-0031 Frademark Office; U.S. DEPARTMENT OF COMMERCE formation unless it displays a valid OMB control number. wheel Sheet the Sheet |  |  |
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|  | ENC   | CLOSURES (Check a   | ii that apply                                     | y)  |  |  |
| Amendme Ai Ai Extension Express A Information  Certified Of Documen Incomplet Reply to I   | smittal Form  ee Attached  ent/Reply  fiter Final  ffidavits/declaration(s)  n of Time Request  Abandonment Request  on Disclosure Statement  Copy of Priority  tt(s)  Missing Parts/ te Application eply to Missing Parts nder 37 CFR 1.52 or 1.53 | Drawing(s)  Licensing-related Papers  Petition  Petition to Convert to a Provisional Application Power of Attorney, Revocati Change of Correspondence  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Landscape Table on Carks | Address   | After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):  Statement Under 37 CFR 3.73(b); Attachment 1; and Return Postcard   |  |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT   |   |   |   |   |  |  |
| Firm Name  | Medtronic Vascular, Inc.  |   |   |   |  |  |
| Signature  | /Catherine C. Maresh, Reg. No. 35,268/  |   |   |   |  |  |
| Printed name   | Catherine C. Maresh   |   |   |   |  |  |
| Date   | Date January 12, 2006   |   | Reg. No.  | 35,268  |  |  |
| CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with |   |   |   |   |  |  |
| sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature         |   |   |   |   |  |  |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Kimberly Melvin

Typed or printed name

Date

January 12, 2006

PTO/SB/82 (04-05) Approved for use through 11/30/2005. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|--|---|--|
| Application Number                       | See Attached Sheet                          |  |
| Filing Date                              | See Attached Sheet                          |  |
| First Named Inventor                     | See Attached Sheet                          |  |
| Art Unit                                 | See Attached Sheet                          |  |
| Examiner Name                            | See Attached Sheet                          |  |
| Attorney Docket Number                   | See Attached Sheet                          |  |

| I hereby revoke all previous powers of attorney given in the above-identified application.   |   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| A Power of Attorney is submitted herewith.   |   |  |  |  |  |  |
| OR  ✓ I hereby appoint the   | he practitioners associated with the Customer Number: 28390 |  |  |  |  |  |
| Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:  28390  OR   |   |  |  |  |  |  |
| Firm or Individual Name  |   |  |  |  |  |  |
| Address  |   |  |  |  |  |  |
| City   | State Zip   |  |  |  |  |  |
| Country  |   |  |  |  |  |  |
| Telephone  | Email   |  |  |  |  |  |
| I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  |   |  |  |  |  |  |
| SIGNATURE of Applicant or Assignee of Record Signature (Catherine C. Marcel, Rog. No. 35 269)  |   |  |  |  |  |  |
| Nome   | Cautefile C. Malesti, Neg. No. 55,200                       |  |  |  |  |  |
| Date January 12, 20  |   |  |  |  |  |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one                                    |   |  |  |  |  |  |
|  |   |  |  |  |  |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. |   |  |  |  |  |  |

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| STATEMENT UNDER 37 CFR 3.73(b)   | 1   |
|--|---|
| Applicant/Patent Owner: _Medtronic Vascular, Inc.  |   |
| Application No./Patent No./Control No.: See Attached Sheet Filed/Issue Date: 5   | See Attached Sheet  |
| Entitled: See Attached Sheet   |   |
| , a, Type of Assignee: corpora   | tion, partnership, university, government agency, etc.)     |
| states that it is:  1.   the assignee of the entire right, title, and interest; or   | , particione, and only, go on more agone, i and             |
| an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is%)   |   |
| in the patent application/patent identified above by virtue of either:   |   |
| A. An assignment from the inventor(s) of the patent application/patent identified at in the United States Patent and Trademark Office at Reel, Framoriginal assignment is attached.  OR  | nove. The assignment was recorded ne, or a true copy of the |
| B. A chain of title from the inventor(s), of the patent application/patent identified a  | bove, to the current assignee as follows:                   |
| 1. From: To: To: The document was recorded in the United States Patent and Trademark Reel, Frame, or for which a copy to   |   |
| 2. From: To:   |   |
| The document was recorded in the United States Patent and Trademark Reel, Frame, or for which a copy   | c Office at<br>y thereof is attached.                       |
| From: To: To: The document was recorded in the United States Patent and Trademark  |   |
| The document was recorded in the United States Patent and Trademark Reel, Frame, or for which a co   | k Office at<br>py thereof is attached.                      |
| Additional documents in the chain of title are listed on a supplemental sheet  | t.  |
| As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of ti assignee was, or concurrently is being, submitted for recordation pursuant to 3 [NOTE: A separate copy (i.e., a true copy of the original assignment document(s Division in accordance with 37 CFR Part 3, to record the assignment in the in 302.08] | 37 CFR 3.11.  )) must be submitted to Assignment            |
| The undersigned (whose title is supplied below) is authorized to act on behalf of the a  | assignee.   |
| /Catherine C. Maresh, Reg. No. 35,268/   | January 12, 2006  |
| Signature  | Date  |
| Catherine C. Maresh  | 707.543.0221  |
| Printed or Typed Name  | Telephone Number  |
| Senior Patent Counsel Title  |   |

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